

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Public Health Service
Indian Health Service
Rockville, Maryland

Refer to: OD/PRCS

INDIAN HEALTH SERVICE CIRCULAR NO. 92-12

CHARTER, NATIONAL COUNCIL OF
SERVICE UNIT DIRECTORS OF
THE INDIAN HEALTH SERVICE

Sec.

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1. PURPOSE. The National Council of Service Unit Directors (NCSUD), as established by the Council of Area and Associate Directors (Council), ensures that the **Service** Unit Directors (SUD) and their tribal counterparts responsibly and effectively participate in the establishment and implementation of an Agency strategy to achieve the Indian Health, **Service** (IHS) mission.
2. RESPONSIBILITIES. The work of the NCSUD falls into five basic functions:
 - A. Ensures that the NCSUD membership understands the IHS mission and strategy for achieving that **mission**;
 - B. Participates in the setting of an Agency strategic action agenda;
 - C. Recommends policy in matters that directly affect the service units to the Council;
 - D. Supports and advocates a system of ongoing recruitment, development, and retention of professional SUD and
 - E. Promotes an organizational culture in which responsible, accountable, professional service unit management in support of health services delivery and an improved health status of Indian people is the norm and reality throughout the IHS.

3. MEMBERSHIP. The NCSUD is a permanent council of the IHS. The NCSUD is composed of all directors of field stations designated as service units and their tribal counterparts, one Headquarters liaison member as appointed by the Council, and one Area Director who is from the same Area as the NCSUD Chair and serves as the Council liaison.

The Chair, Chair-elect, and Secretary of the NCSUD. are elected each year from among the membership. The Chair presides at general meetings of the NCSUD and of the Executive Committee, and appoints ad hoc committees as necessary to address NCSUD issues relevant to the NCSUD mission.

4. RELATIONSHIPS.


A. To **the** Operations Committee of the Council:

The Operations Committee of the Council serves as the liaison between the NCSUD and the Council. The Operations Committee is responsible for keeping the NCSUD informed of the Council deliberations and ensuring that the NCSUD has appropriate access to the Council.

The NCSUD will coordinate and communicate with the Council of Chief Medical Officers (CCMO), and the Executive Committee of the National Council of Clinical Directors (NCCD) on program issues, action items, or policy of mutual concern. One NCSUD Executive Committee meeting each year will be concurrent with the CCMO and the Executive Committee of the NCCD.

5. AUTHORITIES. The NCSUD shall carry out such responsibilities and Authorities as are provided in this Charter, as well as those delegated to it, in writing, by the Chair of the Council of Area and Associate Directors.
6. MEETINGS. The NCSUD will hold an annual general meeting at a time and place to be determined by the Executive Committee of the NCSUD in consultation with the Headquarters liaison. The Chair may call additional meetings, as necessary.
7. EXECUTIVE COMMITTEE. The Executive Committee consists of the Chair, immediate past-Chair, vice-Chair, and Secretary of the NCSUD, plus one representative from each of the IHS Areas as designated by the Area Director of each Area. The Executive Committee functions are:
 - A. Selects a time and place and develops the agenda for general meetings of the NCSUD;

- B. Acts for the NCSUD between meetings of the full NCSUD; and
 - C. Fulfills special charges of the **NCSUD, Council, or** Director of the IHS.
8. REPORTS. The Chair of the NCSUD will be responsible for assigning and coordinating the drafting of reports, position **statements**, and recommendations **of** the NCSUD; and will report at each quarterly meeting of the Council of Area and Associate Directors.
9. SUPERSESSSION. This circular supersedes IRS Circular No. 76-1, The National Council of Service Unit Directors, dated January 27, 1976, in its entirety,


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